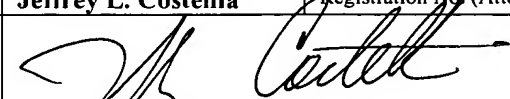


UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No. 740756-2660	First Inventor Shunpei YAMAZAKI et al	Title ELECTRO-OPTICAL DEVICE AND ELECTRONIC DEVICE	Express Mail Label No.
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.			ADDRESS TO: Commissioner for Patents Box Patent Application Washington, DC 20231		
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)			7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)		
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)		
3. <input checked="" type="checkbox"/> Specification [Total Pages 67] (preferred arrangement set forth below)			a. <input type="checkbox"/> Computer Readable Form (CRF)		
- Descriptive title of the invention			b. Specification Sequence Listing on:		
- Cross Reference to Related Applications (if applicable)			i. <input type="checkbox"/> CD-ROM or CD-R (2 copies; or		
- Statement Regarding Fed sponsored R & D (if applicable)			ii. <input type="checkbox"/> paper		
- Reference to sequence listing, a table, or a computer program listing appendix (if applicable)			c. <input type="checkbox"/> Statements verifying identity of above copies		
- Background of the Invention			ACCOMPANYING APPLICATION PARTS		
- Brief Summary of the Invention			9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))		
- Brief Description of the Drawings (if filed)			10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) Attorney		
- Detailed Description			11. <input type="checkbox"/> English Translation Document (if applicable)		
- Claim(s)			12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations		
- Abstract of the Disclosure			13. <input type="checkbox"/> Preliminary Amendment		
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Figs. 1-23 [Total Sheets 23]			14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)		
5. Oath or Declaration [Total Pages 5]			15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)		
a. <input checked="" type="checkbox"/> Newly executed (original or copy)			16. <input type="checkbox"/> Nonpublication request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.		
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)			17. <input type="checkbox"/> Other: _____		
i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)					
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76					
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> CIP of prior application No.: 09/578,895 filed May 26, 2000 Prior application information: Examiner: Gene M. Munson Group / Art Unit: 2811 For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.					
19. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		22204		or <input type="checkbox"/> Correspondence address below	
Name					
Address					
City		State		Zip Code	
Country		Telephone		Fax	
		(202) 585-8000		(202) 585-8080	
Name (Print/Type)		Jeffrey L. Costellia		Registration No. (Attorney/Agent)	
				35,483	
Signature				Date	
				October 6, 2003	

# FEE TRANSMITTAL FOR FY 2003

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 750.00)

Complete if Known

Application Number	Not Yet Assigned
Filing Date	October 6, 2003
First Named Inventor	Shunpei YAMAZAKI et al
Examiner Name	Gene M. Munson
Art Unit	2811
Attorney Docket No.	740756-2660

## METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number 19-2380(740756-2660)

Deposit Account Name Nixon Peabody LLP

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments  
☒ Charge any additional fee(s) during the pendency of this application  
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
1001	750	2001	375	Utility filing fee	750.00
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$ 750.00)

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims 1 -20\*\* = 0 X Fee from below = Fee Paid  
 Independent Claims 1 -3\*\* = 0 X Fee from below = 0  
 Multiple Dependent X Fee from below = 0

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ )

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet
1053	130	1053	130	Non-English specification
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action
1251	110	2251	55	Extension for reply within first month
1252	410	2252	205	Extension for reply within second month
1253	930	2253	465	Extension for reply within third month
1254	1,450	2254	725	Extension for reply within fourth month
1255	1,970	2255	985	Extension for reply within fifth month
1401	320	2401	160	Notice of Appeal
1402	320	2402	160	Filing a brief in support of an appeal
1403	280	2403	140	Request for oral hearing
1451	1,510	1451	1,510	Petition to institute a public use proceeding
1452	110	2452	55	Petition to revive - unavoidable
1453	1,300	2453	650	Petition to revive - unintentional
1501	1,300	2501	650	Utility issue fee (or reissue)
1502	470	2502	235	Design issue fee
1503	630	2503	315	Plant issue fee
1460	130	1460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1806	180	1806	180	Submission of Information Disclosure Stmt
8021	40	8021	40	Recording each patent assignment per property (times number of properties)
1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))
1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))
1801	750	2801	375	Request for Continued Examination (RCE)
1802	900	1802	900	Request for expedited examination of a design application

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ )

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Mail Stop: Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

Name: \_\_\_\_\_

## SUBMITTED BY

Name (Print/Type) Jeffrey L. Costellia

Registration No. (Attorney/Agent)

35,483

Complete (if applicable)

Telephone (202) 580-8000

Date October 6, 2003

Signature